

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Wisconsin Medical Society Political Action Committee

ADDRESS (number and street)

330 E. Lakeside Street

Check if different  
than previously  
reported. (ACC)

Madison

WI

53715

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00548438

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

11

08

2016

in the  
State of

WI

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

10

01

2016

through

M M M /

D D D /

Y Y Y Y Y Y

10

19

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Rasch, Chris, , Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

Rasch, Chris, , Mr.,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

10

25

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19) .....	5850.00	27916.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5850.00	27916.00
7. Total Disbursements (from Line 31).....	5850.00	27916.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0.00	0.00
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Wisconsin Medical Society Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5850.00	27916.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5850.00	27916.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5850.00	27916.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5850.00	27916.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5850.00	27916.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5850.00	27916.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5850.00	27916.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5850.00	27916.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5850.00	27916.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5850.00	27916.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Syth, Linda, , Ms.,

Mailing Address 374 Oakwood Dr

City  
Oregon

State  
WI

Zip Code  
53575-3431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Wisconsin Medical Society

Occupation (for Individual)  
CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 03 / 2016

Transaction ID : 8310779

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark for Nelson for Wisconsin

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morris, George, L., Doctor,

Mailing Address 1578 E Cumberland Blvd

City

Whitefish Bay

State

WI

Zip Code

53211-1141

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Epilepsy Care Specialists SC

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2016

Transaction ID : 8311112

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmark for Hillary for America

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Janis, Angela, Christine, Doctor,

Mailing Address 100 Wisconsin Ave Apt 1005

City

Madison

State

WI

Zip Code

53703-4171

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University Health Services Clinic

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2016

Transaction ID : 8330732

Amount of Each Receipt this Period

150.00

☐ Memo Item

Earmark for Nelson for Wisconsin

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Murdy, David, Charles, Doctor,**

Mailing Address 2506 Linden Ave

City  
Janesville

State  
WI

Zip Code  
53548-2378

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Dean Clinic - Janesville East

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
10 / 05 / 2016

**Transaction ID : 8330743**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmark for Ron Johnson for Senate Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lee, JoAnn, Kathy, ,**

Mailing Address 206 Webster St

City  
Beaver Dam

State  
WI

Zip Code  
53916-3046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UW Health-Horicon

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
10 / 05 / 2016

**Transaction ID : 8330747**

Amount of Each Receipt this Period

1100.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Miller, Michael, Michel, Doctor,**

Mailing Address 27 Settler Hill Circle

City  
Madison

State  
WI

Zip Code  
53717-2704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Rogers Memorial Hospital - Oconomowoc

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY  
10 / 05 / 2016

**Transaction ID : 8330750**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Wisconsin Medical Society Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Morris, George, L., Doctor,**

Mailing Address 1578 E Cumberland Blvd

City  
Whitefish BayState  
WIZip Code  
53211-1141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Epilepsy Care Specialists SCOccupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : 8330753

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Miller, Michael, Michel, Doctor,**

Mailing Address 27 Settler Hill Circle

City  
MadisonState  
WIZip Code  
53717-2704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Rogers Memorial Hospital - OconomowocOccupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : 8340722

Amount of Each Receipt this Period

75.00

☐ Memo Item

Earmark for Tammy Baldwin for Senate

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Janis, Angela, Christine, Doctor,**

Mailing Address 100 Wisconsin Ave Apt 1005

City  
MadisonState  
WIZip Code  
53703-4171FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University Health Services ClinicOccupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

Transaction ID : 8345725

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1325.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Levin, Allan, Bertram, Doctor,**

Mailing Address 4585 Fox Bluff Lane

City  
Middleton

State  
WI

Zip Code  
53562-2327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2016

Transaction ID : 8345728

Amount of Each Receipt this Period

200.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. White, Michael, J., Doctor,**

Mailing Address W1390 County Rd AE

City  
Mindoro

State  
WI

Zip Code  
54644-9421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Mayo Clinic Health System - Franciscan

Occupation (for Individual)

Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : 8348829

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmark for Jill Stein for President

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wilhelm, Kurt, , , MD**

Mailing Address 208 Parker St

City  
Boscobel

State  
WI

Zip Code  
53805-1648

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Boscobel Clinic SC

Occupation (for Individual)

Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : 8348833

Amount of Each Receipt this Period

125.00

☐ Memo Item

Earmark for Ron Johnson for Senate Inc

SUBTOTAL of Receipts This Page (optional).....▶

425.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wertsch, Paul, A., Doctor,**

Mailing Address 4221 Venetian Ln

City  
MadisonState  
WIZip Code  
53718-6655FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Wildwood Family Clinic SCOccupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

**Transaction ID : 8348836**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Earmark for Ron Johnson for Senate Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rainey, Charles, James, Doctor,**

Mailing Address 9590 N Range Line Rd

City  
River HillsState  
WIZip Code  
53217-1019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
No Clinic Information Listed MilwaukeeOccupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

**Transaction ID : 8348839**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark for Ron Johnson for Senate Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Osborn, Sandra, L., Doctor,**

Mailing Address 2085 County Road J

City  
VeronaState  
WIZip Code  
53593-8829FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UW School of Medicine and Public HealthOccupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

**Transaction ID : 8348848**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Merkitch, Kenneth, William, Doctor,**

Mailing Address W5732 Heatherwood Place

City  
La Crosse

State  
WI

Zip Code  
54601-2476

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gundersen La Crosse Clinic

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : 8348850

Amount of Each Receipt this Period

200.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Saunders, Michael, Joseph, Doctor,**

Mailing Address 1405 Kilbourn Ave

City  
Tomah

State  
WI

Zip Code  
54660-2635

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mayo Clinic Health System - Franciscan

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : 8348852

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. White, Michael, J., Doctor,**

Mailing Address W1390 Kil County Rd AE

City  
Mindoro

State  
WI

Zip Code  
54644-9421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mayo Clinic Health System - Franciscan

Occupation (for Individual)  
Physician

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2016

Transaction ID : 8348857

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmark for Russ for Wisconsin Inc

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

550.00

5850.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nelson for Wisconsin**

Mailing Address P.O. Box 348

City  
KaukaunaState  
WIZip Code  
54130Purpose of Disbursement  
Earmarked by Linda Syth; PAC limits unaffected

011

Category/  
Type

Candidate Name

**Nelson, Tom, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2016

FEC Identification Number

C

**Transaction ID : 8310807**

Amount of Each Disbursement this Period

250.00

☐ Memo Item Earmarked by Linda Syth; PAC limits unaffected

Full Name (Last, First, Middle Initial)

**B. Hillary for America**

Mailing Address P.O. Box 2001

City  
New YorkState  
NYZip Code  
10116-2001Purpose of Disbursement  
Earmarked by George Morris, PAC limits unaffected

011

Category/  
Type

Candidate Name

**Clinton, Hillary, , ,**Office Sought: ☐ House  
☐ Senate  
☒ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C C00575795

**Transaction ID : 8318332**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item Earmarked by George Morris, PAC limits unaffected

Full Name (Last, First, Middle Initial)

**C. Nelson for Wisconsin**

Mailing Address P.O. Box 348

City  
KaukaunaState  
WIZip Code  
54130Purpose of Disbursement  
Earmarked by Angela Janis; PAC limits unaffected

011

Category/  
Type

Candidate Name

**Nelson, Tom, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C

**Transaction ID : 8330742**

Amount of Each Disbursement this Period

150.00

☐ Memo Item Earmarked by Angela Janis; PAC limits unaffected**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1400.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ron Johnson For Senate Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Mailing Address 219 E Washington Ave  
Suite 101City  
OshkoshState  
WIZip Code  
54901Purpose of Disbursement  
Earmark by David Murdy; PAC limits unaffected

011

Category/  
Type

Candidate Name

**Johnson, Ron, , Sen.,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District:

FEC Identification Number

C C00482984

**Transaction ID : 8330745**

Amount of Each Disbursement this Period

500.00

☐ Memo Item Earmark by David Murdy; PAC limits unaffected

Full Name (Last, First, Middle Initial)

**B. Russ for Wisconsin Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmarked by (see memo entries); PAC limits unaffected

011

Category/  
Type

Candidate Name

**Feingold, Russ, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District:

FEC Identification Number

C C00578013

**Transaction ID : 8330755**

Amount of Each Disbursement this Period

2200.00

☐ Memo Item Earmarked by (see memo entries); PAC limits unaffected

Full Name (Last, First, Middle Initial)

**C. Russ for Wisconsin Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by JoAnn Lee; PAC limits unaffected

011

Category/  
Type

Candidate Name

**Feingold, Russ, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District:

FEC Identification Number

C C00578013

**Transaction ID : 8340719**

Amount of Each Disbursement this Period

1100.00

(Memo Entry)

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2700.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by Michael Miller; PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				05				2016					

FEC Identification Number

C C00578013

Transaction ID : 8340720

Amount of Each Disbursement this Period

100.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by George Morris; PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				05				2016					

FEC Identification Number

C C00578013

Transaction ID : 8340721

Amount of Each Disbursement this Period

1000.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tammy Baldwin for Senate**

Mailing Address PO Box 696

City  
MadisonState  
WIZip Code  
53701Purpose of Disbursement  
Earmark by Michael Miller; PAC limits unaffected

011

Candidate Name

Baldwin, Tammy, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				05				2016					

FEC Identification Number

C C00326801

Transaction ID : 8340724

Amount of Each Disbursement this Period

75.00

Earmark by Michael Miller; PAC  
limits unaffected☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

75.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by Angela Janis 250, Allan Levin 200; PAC limits unaffected

011

Candidate Name

**Feingold, Russ, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			13			2016					

FEC Identification Number

C C00578013

**Transaction ID : 8345730**

Amount of Each Disbursement this Period

450.00

☐ Memo Item Earmark by Angela Janis 250, Allan Levin 200; PAC limits unaffected

Full Name (Last, First, Middle Initial)

**B. Jill Stein for President**

Mailing Address P.O. Box 260197

City  
MadisonState  
WIZip Code  
53726Purpose of Disbursement  
Earmark by Michael White; PAC limits unaffected

011

Candidate Name

**Stein, Jill, , ,**

Office Sought:

☐ House  
☐ Senate  
☒ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2016					

FEC Identification Number

C

**Transaction ID : 8348831**

Amount of Each Disbursement this Period

100.00

☐ Memo Item Earmark by Michael White; PAC limits unaffected

Full Name (Last, First, Middle Initial)

**C. Ron Johnson For Senate Inc**Mailing Address 219 E Washington Ave  
Suite 101City  
OshkoshState  
WIZip Code  
54901Purpose of Disbursement  
Earmark by (see memo entries); PAC limits unaffected

011

Candidate Name

**Johnson, Ron, , Sen.,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2016					

FEC Identification Number

C C00482984

**Transaction ID : 8348842**

Amount of Each Disbursement this Period

375.00

☐ Memo Item Earmark by (see memo entries); PAC limits unaffected
**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

925.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Ron Johnson For Senate Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

Mailing Address 219 E Washington Ave  
Suite 101City  
OshkoshState  
WIZip Code  
54901Purpose of Disbursement  
Earmark by Kurt Wilhelm; PAC limits unaffected

011

Category/  
Type

Candidate Name

Johnson, Ron, , Sen.,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District:

FEC Identification Number

C C00482984

Transaction ID : 8348843

Amount of Each Disbursement this Period

125.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ron Johnson For Senate Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

Mailing Address 219 E Washington Ave  
Suite 101City  
OshkoshState  
WIZip Code  
54901Purpose of Disbursement  
Earmark by Paul Wertsch; PAC limits unaffected

011

Category/  
Type

Candidate Name

Johnson, Ron, , Sen.,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District:

FEC Identification Number

C C00482984

Transaction ID : 8348846

Amount of Each Disbursement this Period

200.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ron Johnson For Senate Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

Mailing Address 219 E Washington Ave  
Suite 101City  
OshkoshState  
WIZip Code  
54901Purpose of Disbursement  
Earmark by Charles Rainey; PAC limits unaffected

011

Category/  
Type

Candidate Name

Johnson, Ron, , Sen.,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WI

District:

FEC Identification Number

C C00482984

Transaction ID : 8348847

Amount of Each Disbursement this Period

50.00

(Memo Entry)

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by (see memo entries); PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C C00578013

Transaction ID : 8348859

Amount of Each Disbursement this Period

750.00

☐ Memo Item Earmark by (see memo entries);  
PAC limits unaffected

Full Name (Last, First, Middle Initial)

**B. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by Sandra Osborn; PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C C00578013

Transaction ID : 8348864

Amount of Each Disbursement this Period

200.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by Kenneth Merkitch; PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C C00578013

Transaction ID : 8348865

Amount of Each Disbursement this Period

200.00

(Memo Entry)

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Wisconsin Medical Society Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by Michael Saunders; PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C C00578013

Transaction ID : 8348866

Amount of Each Disbursement this Period

250.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Russ for Wisconsin Inc**

Mailing Address P.O. Box 620061

City  
MiddletonState  
WIZip Code  
53562Purpose of Disbursement  
Earmark by Michael White; PAC limits unaffected

011

Candidate Name

Feingold, Russ, , ,

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C C00578013

Transaction ID : 8348867

Amount of Each Disbursement this Period

100.00

(Memo Entry)

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

5850.00